

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		12	4/12
FORMALITY REVIEW	BZ	303823	05-30-01
RESPONSE FORMALITY REVIEW	CGH	875	9/20/01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	10/1/03/02
2	5/19/02
3	11/12/02
4	3/20/01
5	8/29/03
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Claim	Date
Final	
Original	
51	10/1/03/02
52	5/19/02
53	11/12/02
54	3/20/01
55	8/29/03
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Claim	Date
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If more than 150 claims or 10 actions:  
 staple additional sheet here

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